

Pregnant Teens in Prison Prevalence, Management, and Consequences

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To estimate the number of pregnant and parenting teens currently incarcerated and to assess the correctional health care and social services provided to this target population, we surveyed 430 juvenile detention and long-term correctional facilities in the United States that incarcerate adolescent girls. Of these, 261 (61%) institutions responded and are included in the analysis. Of these facilities, 68% estimated that they were holding 1 to 5 pregnant adolescents on a given day, with a reported yearly (September 1991 to September 1992) census of 2,000 pregnant teenagers and 1,200 teenaged mothers. Nearly half of the facilities (45%) continue to incarcerate after it is determined that a youth is pregnant. Of those institutions that incarcerate pregnant adolescents, 31% provide no prenatal services and 70% provide no parenting classes. Of these facilities, 60% reported at least 1 obstetric complication in their pregnant population. A substantial number of pregnant and parenting adolescents are in custody in the United States. General community standards of health and social services for pregnant and parenting teenagers are not being met by the institutions that incarcerate them.

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A growing number of children and adolescents are arrested each year in the United States. In 1990, almost 2 million youths were arrested; 12%, or 240,000, were female, an increase of 24% since 1986.¹ In 1989, the daily census of female adolescents in custody was 6,700.² Most are detained for status offenses such as running away and breaking curfew; yet, 18% were held for delinquent offenses, acts that would be crimes if committed by adults, including murder, theft, and drug or alcohol offenses.³ Concurrently, approximately 1 million teenagers become pregnant each year, or 1 of 10 of teenaged girls.⁴ As more adolescent girls are being arrested, convicted of crimes, and sentenced to long-term correction, the inevitable occurs: pregnant adolescents are incarcerated. If the rates for arrest and incarceration are the same for pregnant and nonpregnant teenagers, we can estimate that at least 24,000 pregnant adolescents are arrested each year or that 670 pregnant teenagers are being incarcerated on a given day. Apart from estimates such as these, the incidence of pregnancy in adolescents who are arrested and ultimately incarcerated is not known. No information is available on the number of teenaged mothers who are currently in custody.

Research on adolescent pregnancy in the past ten years has indicated that multidisciplinary interventions and good prenatal care can improve the outcomes of

pregnancy, postpartum attachment, and the future prevention of unwanted pregnancies.⁵⁻¹¹ Juvenile delinquents who are pregnant and incarcerated may be at higher risk for poor outcomes, both medically and socially^{12,13}; yet, there has been no systematic review of the basic medical and social services that they receive or the outcomes of their pregnancies.

The purposes of our national study were to estimate the daily and yearly census of pregnant incarcerated adolescents, the yearly census of incarcerated teenaged mothers, and the number of facilities that provide obstetric and social services to their incarcerated pregnant and parenting adolescents. Our conceptual framework was that the number of pregnant teens in institutions is higher than in the general community, that their pregnancy-related care is poor, and that the juvenile corrections system is ill-equipped to serve the special needs of these young women.

Methods

We sent survey questionnaires to representatives from all 430 institutions that incarcerate female adolescents (aged 13 to 18 years) in the United States using information from the National Commission on Correctional Health Care and the Juvenile Detention Directory.¹⁴ Of these, 353 were detention facilities

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TABLE 1.—Race and Ethnic Breakdown of Total Number (%) Versus Number (%) of Pregnant Incarcerated Teens

Race/Ethnicity	Total Female Population, No.	Total Female Population, (%) ^a	Total Pregnant Population, No.	Total Pregnant Population, (%)
White.....	105	(51)	689	(36)
African American....	62	(30)	891	(47)
Hispanic	17	(8)	243	(13)
Other.....	24	(11)	91	(4)
Total.....	208	(100)	1,914	(100)

^aFrom the American Correctional Association.¹⁵

(shorter than 90-day stays), and 77 were long-term correctional institutions that incarcerate youths for at least six months.

The questionnaire consisted of 19 questions: the demographics of each institution including location, total number of youths in the facility, and occupation of the respondent; estimates of the number of pregnant and parenting teenagers currently in custody or during the previous 12 months (response choices were 0, 1 to 5, 6 to 10, 11 to 25, and more than 25); information on the availability of prenatal health care; policy concerning the return of adolescents to custody after giving birth; data pertaining to the placement of a newborn infant or child while the mother is in custody; a retrospective review of the presence or absence of specific obstetric complications; and an open-ended comment section. Mean and frequency distributions were analyzed using the Statistical Program for the Social Sciences.

Results

A total of 430 superintendents of institutions were sent surveys with instructions to have a health care professional or other qualified person respond. The responses numbered 261, for a response rate of 61%, representing a sample from 41 states. The median number of youths in custody per institution was 30; 49% reported 29 or fewer youths. On the day of the survey, 21% of the respondents reported an average of 0 pregnant teenagers in custody, 68% of the respondents held an average of 1 to 5 pregnant adolescents, 4% incarcerated between 6 and 10 pregnant teenagers, and 1% held 11 to 25 pregnant adolescents in custody.

There were proportionately more African-American adolescent girls who were incarcerated and pregnant than in the overall population of incarcerated female adolescents (Table 1).¹⁵

Many of the institutions (125 of 231, 55%) release a young woman from custody if she has a confirmed pregnancy. Early releases may occur for one of three reasons: a previous legal action against the corrections center for poor obstetric care; a perception, real or imagined, that these young women may be more likely to stay out of trouble if they are pregnant; or the personnel of the institution indicating that they could not handle the medical or social needs of these young women. Nearly a third of the institutions (30%) have group homes available for court-approved placement after release; the disposition of the other young women is unknown.

Of the responding facilities that retain pregnant youths (106 of 231, 45%), 27% have no social work services available, 31% have no nursing or basic prenatal care, 38% have no obstetric prenatal services, 62% have no nutritionist available, 70% do not teach parenting, and 87% do not provide childbirth education classes. Of those institutions, 78% who retain custody of pregnant teenagers may return them to the custodial facility after delivery. Of the facilities with incarcerated teenaged mothers, 46% had no mother-infant visitation policy in effect. Regarding the temporary placement of children of incarcerated mothers, 29% of the respondents did not know where the children had been placed. Of the respondents who were aware of a child's placement, 64% reported that the children were placed with a family member, 43% were in foster care, and 11% were adopted, some by a family member. When obstetric complication rates were analyzed, 60% of the facilities with pregnant youths in custody reported at least one complication.

Discussion

An extensive review of the literature suggests that ours is the first attempt to count the number of pregnant and parenting adolescent girls from all secure institutions and to review the services provided. If we extrapolate from the daily and yearly estimates, we can project a daily census of at least 500 to 1,000 in the United States. Using the same projection, between 1,800 and 2,500 pregnant adolescents and minimally 500 to 1,000 teenaged mothers were incarcerated from September 1991 to September 1992. These numbers may be an underestimate; many institutions acknowledged that they did not actually know how many adolescent parents were in custody because they do not routinely ask about this when the youths are detained.

From the comment section of the survey, we learned much about the problems each facility faces in dealing with these teens, including only partial use of prenatal and obstetric services available in the public health sector, piecemeal institutional care, and lack of continuity for follow-up care in the community. This may be ascribed to a lack of either funds or knowledge of community resources. We also discovered that a few institutions do provide extensive services for their pregnant and parenting youths and may ultimately serve as models for other correctional institutions. These institutions may have access to university-based adolescent training programs or to departments of public health that are used to dealing with correctional institutions.

The increasing number of pregnant and parenting teens in custody reflects societal changes that are difficult to overlook. Young adolescent women are committing serious violent crimes with or without the knowledge that they are pregnant. It is unknown whether a teen's knowledge of her pregnancy would deter her from continued criminal activity. From the number of teenaged mothers in custody, it would seem, at least for some young women, that it would not. A career in crime

continues for some female delinquents despite pregnancy and parenthood.¹⁶

How well are we serving these young women and their offspring? Our survey shows that high-risk youths whose use of health care is usually fragmented^{13,17} may receive no better care when they are in custody and are more available for services.

Intensive intervention using a multidisciplinary approach with good prenatal care may lead to better results.⁵⁻¹¹ After delivery, a teenaged mother must be thoroughly taught effective parenting skills in the presence of her child to encourage bonding and attachment.¹⁸⁻²⁰ Adding delinquency and incarceration to the equation mandates the need to intervene and provide appropriate health services. If the basics are not provided, we are endangering these extremely high-risk young women and their children.

When the next survey is done, we recommend that a current breakdown by sex be requested from each institution, rather than the total number of youth; that respondents give an exact number of pregnant and parenting teens in custody rather than estimating a range; and that to improve response rates, telephone follow-up be used for those institutions that had not replied.

Conclusion

Our survey reveals a large number of young women in custody who are pregnant and parenting, with inadequate provision of pregnancy-related services. Further research involving tracking delinquent or incarcerated pregnant and parenting teens is required. The management of pregnant incarcerated adolescents in short-versus long-term facilities should be compared. With all of this information, rational decisions can be made about ways to provide health care services to incarcerated pregnant and parenting youths.

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